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4/29/03  
Prullen

PATENT

10/010,696  
AMENDMENT IN RESPONSE TO  
(OFFICE ACTION DATED JANUARY 30, 2003)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:

Visvamohan Yegnashankaran et al.

Appln. No.: 10/010,696

Filed: December 5, 2001

For: MULTILEVEL METAL INTERCONNECT  
WITH CAPACITIVE STRUCTURES  
THAT ADJUST THE CAPACITANCE OF  
THE INTERCONNECT (as previously  
amended)

Group Art Unit: 2811

Examiner: Q.D. Vu

AMENDMENT (IN RESPONSE TO OFFICE  
ACTION DATED January 30, 2003)

**INTRODUCTORY COMMENTS**

Commissioner for Patents  
Washington, D.C. 20231

Dear Sir:

In response to the Official Action mailed January 30, 2003, please amend the  
above-identified application as indicated on the following pages.

04/23/2003 MDAMTE1 00000011 10010696

01 FC:1201

84.00 OP

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the  
United States Postal Service, postage prepaid, in an envelope,  
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Washington D.C. 20231-9999 on April 16, 2003.

Dated: 04-16-03

By: Sabrina L. Keay

Atty. Docket No. 100-16200 (P05088)

-1-

TECHNOLOGY CENTER 2800  
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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/010,696
Filing Date	December 5, 2001
First Named Inventor	Visvamohan Yegnashankaran et al.
Group Art Unit	2811
Examiner Name	Q. D. Vu

23

Attorney Docket Number

100-16200 (P05088)

## ENCLOSURES (check all that apply)

 Fee Transmittal Form (in duplicate) Assignment Papers  
(for an Application) After Allowance Communication to Group Fee Attached (check for \$84.00) Drawing(s) Appeal Communication to Board of Appeals and Interferences Amendment/Response Licensing-related Papers Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) After Final (Response) Petition Routing Slip (PTO/SB/69) and Accompanying Petition Proprietary Information Affidavits/declaration(s) Petition to Convert to a Provisional Application Status Inquiry Extension of Time Request Power of Attorney, Revocation Change of Correspondence Address Other Enclosure(s)  
(please identify below): Express Abandonment Request Terminal DisclaimerReturn Receipt Postcard  
Certificate of Mailing Information Disclosure Statement Request for Refund Certified Copy of Priority Document(s) CD, Number of CD(s) \_\_\_\_\_ Response to Missing Parts/ Incomplete Application

Remarks

Please charge any necessary fees or credit overpayment to Deposit Account No. 502305. A duplicate copy of this transmittal is attached for this purpose.

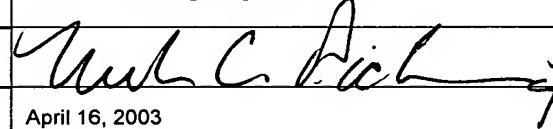
 Response to Missing Parts under 37 CFR 1.52 or 1.53

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm  
or  
Individual name

Mark C. Pickering, Reg. No. 36,239

Signature



Date

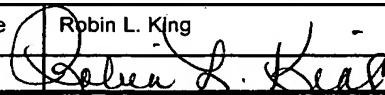
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April 16, 2003

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Date April 16, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

# FEE TRANSMITTAL

For FY 2003

*Patent Fees are subject to annual revision.*

APR 22 2003

TOTAL AMOUNT OF PAYMENT

\$84

*Complete if Known*

Application Number	10/010,696
Filing Date	December 5, 2001
First Named Inventor	Visvamohan Yegnashankaran et al.
Examiner Name	Q.D. Vu
Group Art Unit	2811
Attorney Document No.	100-16200 (P05088)

## METHOD OF PAYMENT (check one)

The Commissioner is hereby authorized to charge any fees or credit any overpayment under 37 CFR 1.16 and 1.17 which may be required by this paper to Deposit Account No. 502305

LAW OFFICES OF MARK C. PICKERING

Applicant claims small entity status. See 37 CFR 1.27.

2.  Payment Enclosed:

Check  Money Order  Other

## FEES CALCULATION

### 1. BASIC FILING FEE

LARGE ENTITY      SMALL ENTITY

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility	
1002	330	2002	260	Design	
1003	520	2003	255	Plant	
1004	750	2004	375	Reissue	
1005	160	2005	80	Provisional	
<b>SUBTOTAL (1)</b>					<b>0</b>

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee from below	Fee Paid
Total Claims	24 - 29 **	= 0	x 18 = \$ 0
Independent	6 - 5	= 1	x 84 = \$ 84
Multiple Dep.		*	= \$ 0

\*\* or number previously paid, if greater; for Reissues, see below:

Large Entity	Small Entity	Fee Description
Fee Code	Fee (\$)	Fee Description
1202	18	2202            9            Claim in excess of 20
1201	84	2201            42            Independent claims in excess of 3
1203	280	2203            140          Multiple dependent claim, if not paid
1204	84	2204            42            ** Reissue ind. claims over original patent
1205	18	2205            9            ** Reissue claims in excess of 20 and over original patent
<b>SUBTOTAL (2)</b>		<b>\$84</b>

## SUBMITTED BY

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By: Mark C. Pickering, Reg. No. 36,239  
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U.S. DEPARTMENT OF COMMERCE

PATENT AND TRADEMARK OFFICE

**EXAMINER'S CASE ACTION WORKSHEET**

Application No.  
10/010,696



Legal Instrument Examiner

CHECK TYPE OF ACTION

DATE OF COUNT

<input type="checkbox"/> Non-Final Rejection	<input type="checkbox"/> Restriction/Election Only	<input type="checkbox"/> Final Rejection
<input type="checkbox"/> Ex Parte Quayle	<input type="checkbox"/> Allowance	<input type="checkbox"/> Advisory Action
<input type="checkbox"/> Examiner's Answer	<input type="checkbox"/> Reply Brief Noted	<input type="checkbox"/> Non-Entry of Reply Brief
<input type="checkbox"/> Defective Notice of Appeal	<input type="checkbox"/> Interference Disposal SPE _____ (Approval for Disposal)	<input type="checkbox"/> Suspension (Examiner-Initiated) SPE _____ (initial)
<input type="checkbox"/> Defective Appeal Brief	<input type="checkbox"/> SIR Disposal (use only after FAOM)	<input type="checkbox"/> Supplemental Examiner's Amendment
<input type="checkbox"/> Miscellaneous Office Letter (With Shortened Statutory Period Set)	<input type="checkbox"/> Notice of Non-Responsive Amendment (With One Month Time Period set)	<input type="checkbox"/> Miscellaneous Office Letter (No Response Period Set)
<input type="checkbox"/> Abandonment after BPAI Decision	<input type="checkbox"/> Supplemental Action (excluding Examiner's Answer)	<input type="checkbox"/> Response to Rule 312 Amendment
<input checked="" type="checkbox"/> Letter Restarting Period for Response (e.g., Missing References)	<input type="checkbox"/> Interview Summary	<input type="checkbox"/> Authorization to Change Previous Office Action SPE: _____ (Initial)
<input type="checkbox"/> Abandonment	<input type="checkbox"/> Express Abandonment Date: _____	<input type="checkbox"/> Other Specify: _____

Examiner's Name: Quang D Vu

AU: 2811